DATE	AT ADDITION	ION ECE OF	COMMINION	200	OF COR	ruormation (m)	OSS A CISO	Take a valid OME	control numbe
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							10	876	tumber 40
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)					SMALL ENTITY		90		ER THAN L ENTITY
FOR INJURIER		LEO . HVAUSER EXTRA			RATE	FEE	1	RATE	FEE
6ASIC FEE (37 CFR 1.16(a))				7		5	OR		, , ,
TOTAL CLAUS (37 CFR 1.16(c))	calns	rs 20 = ·		7	x s =		7	x s e	
DADEPERDENT CLAIMS		n 3 = .		1		 	OR	X 3	
MULTIPLE DEPENDENT CLAIM PRESENT				1	X 3 •	 -	OR	× 5 *	
					+ \$=	 	OR	+ 5	
* if the difference in column 1 is less than zero, enter "0" in calumn 2.					TOTAL	<u></u>	OR	TOTAL	L
OF CLAIM	AS AS AMENDE	ED – PART II							
5/19/05 (Column 1)		(Column 2) (Column 3)			SMALL ENTITY		OR		R THAN ENTITY
Q RE	CLAIMS MAINING	HIGHEST NUMBER	PRESENT	7 [1		1
INA LE	AFTER ENDMENT	PREVIOUSLY PAID FOR			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(cl)	Uo Minu	19	6		x s +		OR	x s_ =	
Independent (37 of R 1.16(bit)	5 Minus	' ' ' 5	•	lΓ	x \$=		OR	xs =	
FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5 =		OR	+5 =	
					TOTAL ADD'L FEE		OR.	TOTAL ADD'L FEE	
. (Cal	tumn 1)	(Column 2)	(Column 3)				O.C.	ADULTEE	
X / a	LAIMS	HIGHEST		Г					
	KAINING FTER	NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Y Total	NOMENT Minus	PAID FOR	-	-		FEE			FEE
C (SF GFR 1.15(c)) C Independent	Minus	1	= ;	12	(\$=		OR .	x \$=	
W Total W (37 GFR 1.18(c)) W (37 GFR 1.18(c)) W (37 GFR 1.18(c))	6	5		12	(5=		OR	x 5-00	200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR 1.16(4))				_	- 5 -		OR	+5 =	
	•				OTAL DD'L FEE		OR	TOTAL ADD'L FEE	an
(Cotur		(Column 2)	(Column 3)					•	
REMA	AIMS AINING TER DMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
La ces racco	Minus	*	-	×		-,	OR	x \$_ =	
Independent •	Minus		•	x				x s =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							OR		
					S_ =		OR [+ \$ =	
* If the entry in column 1 is	less than the entry	la columa 2. write	"O" in column 3		DO'L FEE		OR	ADD'L FEE	
"If the "Highest Number Pr	COVINIEN POIN FACE	いっていい くりょうてん	love than 20 as	ter 7 14 3°.	o°.				

Under the Paperwork Reduction Act of 1995, no necessary are required to man

The "tighest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to tile (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete bits form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.